Fill in this information	tion to identify your case:	
Debtor 1	Janis Riley Allen	
Debtor 2 (Spouse, if filing)		
United States Ban	skruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
Case number	19-50625	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	rm 106 <u>l</u>	MM / DD/ YYYY
Schodulo	I: Vour Incomo	40/

### Scheaule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Empleyment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	□ Not employed	☐ Not employed
employers.	Occupation	Executive Assistant	Fleet Manager
Include part-time, seasonal, or self-employed work.	Employer's name	Orange Business Service	s Black Umbrella, Inc
Occupation may include student or homemaker, if it applies.	•		300 Lake Sovereign Court Canton, GA 30114
	How long employed the	nere? 19 years	10 Months

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. Calculate gross Income. Add line 2 + line 3.

		Tor Deptor 1		-filing spouse
2.	\$	4,929.60	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	4,929.60	\$	0.00

For Dobtor 1 For Dobtor 2 or

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Janis Riley Allen	-	C	Case	number (if known	) _	19-50	625			
					For	Debtor 1			Debtor :			
	Сор	y line 4 here	4.		\$	4,929.60	)	**************************************	filing s	0.00		
5.	l iet	all payroll deductions:					_				_	
J.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	749.39	,	\$		0.00		
	5a. 5b.	Mandatory contributions for retirement plans	5a 5b		<b>\$</b> -	0.00	_	\$		0.00	_	
	5c.	Voluntary contributions for retirement plans	5c		<b>\$</b> -	0.00		\$		0.00	_	
	5d.	Required repayments of retirement fund loans	5d		<b>\$</b> -	576.38	_	\$		0.00	_	
	5e.	Insurance	5e		<b>\$</b> -	647.86	_	\$		0.00	_	
	5f.	Domestic support obligations	5f.		<u> </u>	0.00	_	\$		0.00	_	
	5g.	Union dues	5g		\$	0.00	_	\$		0.00	_	
	5h.	Other deductions. Specify:	5h		\$_	0.00	) +	- \$		0.00	_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,973.63	3	\$		0.00	_	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,955.97	7	\$		0.00	_	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					_				_	
		monthly net income.	8a	١.	\$	0.00	)	\$		0.00		
	8b.	Interest and dividends	8b		\$	0.00	_	\$		0.00	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.00	_	\$		0.00		
	04		8c 8d		\$ -	0.00	_	\$ 		0.00	_	
	8d. 8e.	Unemployment compensation Social Security	8e		<b>\$</b> —	0.00	_	\$ 		0.00	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$_	0.00	)	\$		0.00	-	
	8g.	Pension or retirement income	8g		\$_	0.00	_	\$		0.00	_	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$_	0.00	) _	\$		0.00		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9		0.00	)	\$		0.0	0	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		2,955.97 +	\$		0.00	= \$	2,95	55.97
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.										
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•			chedule 11.			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$		55.97
	_		_							monthl		ome
13.	Do y	you expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	?									

Official Form 106l Schedule I: Your Income page 2

	in this informati	tion to identify yo	ur oo <del>oo</del>						
Deb	otor 1	Janis Riley A	llen			Ch		f this is: n amended filing	
Deb	otor 2					_		ŭ	ving postpetition chapter
(Spo	ouse, if filing)					_	13	expenses as of	the following date:
Unit	ted States Bankri	uptcy Court for the:	NORTH	ERN DISTRICT OF GEO	RGIA		MI	M / DD / YYYY	
	se number 19	)-50625							
Of	fficial Fo	rm 106J							
		J: Your I	Exper	ises					12/1
Be info	as complete a	and accurate as	possible. eded, atta	. If two married people ar ch another sheet to this					
Par		ibe Your House	hold						
1.	Is this a join								
	■ No. Go to	line 2. s Debtor 2 live i	n a sonar	ate household?					
	□ res. <b>Doe</b> .		ii a sepai	ate nousenoia:					
	= :::	_	t file Offici	al Form 106J-2, Expenses	s for Separate House	hold of D	ebtor	2.	
2.	Do you have	e dependents?	□ No	•	,				
	Do not list De Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?
	Do not state	tha							□ No
	Do not state dependents i				Granddaughte	r		6 months	Yes
									□ No
					Great- Niece			5	Yes
					Doughton			24	□ No
					Daughter			24	■ Yes □ No
					Niece			38	□ No ■ Yes
3.	Do your exp	enses include	_	No					<b>–</b> 165
		people other the population is properties. The properties in the pender is the properties in the prope	nan $_{f \Box}$	Yes					
	yoursen and	i your depender	113 :						
exp	imate your ex	ate Your Ongoir penses as of you date after the b	ur bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this foolemental <i>Schedule</i>	orm as a <i>J</i> , check	supp the	lement in a Cha box at the top o	pter 13 case to report f the form and fill in the
the		assistance and		government assistance i cluded it on <i>Schedule I:</i> \				Your expo	enses
•		•							
4.		r home owners d any rent for the		ses for your residence. I or lot.	nclude first mortgage		\$		819.03
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	\$		0.00
		rty, homeowner's	, or renter	's insurance		4b.			0.00
				ipkeep expenses		4c.			100.00
5.		owner's associati		dominium dues our residence, such as ho	me equity loans	4d.	\$ \$		0.00 0.00
J.	Auditional II	iorigage payille	into ioi yt	our residence, such as 110	nic equity loans	ა.	Ψ		0.00

Debtor 1 Jan	is Riley Allen	Case num	ber (if known)	19-50625
6. Utilities:				
	etricity, heat, natural gas	6a.	\$	425.00
	er, sewer, garbage collection	6b.	·	150.00
	ephone, cell phone, Internet, satellite, and cable services	6c.	·	650.00
	er. Specify:	6d.	·	0.00
	housekeeping supplies	— od. 7.	\$	800.00
	and children's education costs	7. 8.	\$	
		9.	\$	320.00
•	laundry, and dry cleaning		·	87.00
	care products and services	10.	\$	100.00
	nd dental expenses	11.	\$	100.00
	ation. Include gas, maintenance, bus or train fare.	12.	\$	500.00
	lude car payments.	13.	\$	
	ment, clubs, recreation, newspapers, magazines, and books		·	0.00
	e contributions and religious donations	14.	\$	0.00
5. Insurance				
	lude insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
15a. Life		15a.	·	0.00
	Ith insurance	15b.	·	0.00
	icle insurance	15c.	·	600.00
	er insurance. Specify:	15d.	\$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	nt or lease payments:			
	payments for Vehicle 1	17a.	*	0.00
	payments for Vehicle 2	17b.	\$	0.00
17c. Othe	er. Specify: <b>Storage</b>	17c.	\$	80.00
17d. Othe	er. Specify:	17d.	\$	0.00
3. Your payn	nents of alimony, maintenance, and support that you did not report as			
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Other pay	ments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
). Other real	property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
20a. Mort	tgages on other property	20a.	\$	0.00
20b. Rea	l estate taxes	20b.	\$	0.00
20c. Prop	perty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mair	ntenance, repair, and upkeep expenses	20d.	\$	0.00
	neowner's association or condominium dues	20e.		0.00
I. Other: Spe	acify:	21.	·	0.00
. Other Spe	ecny.		-Ψ	0.00
2. Calculate	your monthly expenses			
22a. Add li	ines 4 through 21.		\$	4,731.03
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	•
	ne 22a and 22b. The result is your monthly expenses.		\$	4,731.03
ZZG. Add II	no 22a ana 22b. The result is your monthly expenses.		Ψ	7,731.03
	your monthly net income.			
23a. Cop	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,955.97
	y your monthly expenses from line 22c above.	23b.	-\$	4,731.03
	• • •			-,
23c. Sub	tract your monthly expenses from your monthly income.			
	result is your monthly net income.	23c.	\$	-1,775.06
	•		,	
4. Do you ex	spect an increase or decrease in your expenses within the year after yo	u file this	form?	
For example	e, do you expect to finish paying for your car loan within the year or do you expect your			ase or decrease because of
_	to the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Janis Riley Allen			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	 I
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA	
Case number	19-50625			
(if known)				■ Check if this is an
				amended filing

#### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	Liet Vour	Craditors	Who Have	Secured Claim	c

<ol> <li>For any creditors that you listed in Part 1 of Schedule I information below.</li> </ol>	D: Creditors Who Have Claims Secured by Property (C	Official Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's AmeriCredit/GM Financial name:  Description of property Location: 2723 Candler Lane SW, Marietta GA 30064	<ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	□ No ■ Yes
Creditor's <i>Nationstar</i> name:  Description of <i>2723 Candler Lane SW Marietta</i> .	<ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> </ul>	□ No ■ Yes
property GA 30064 Cobb County securing debt:  Creditor's Santander Consumer USA	☐ Retain the property and [explain]:	П
name:	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of 2016 Chrysler 200  Location: 2723 Candler Lane	Retain the property and enter into a Reaffirmation Agreement.	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Janis Ri	iley Allen	Case number (if known)	19-50625	
property <b>S</b> securing debt:	W, Marietta GA 30064	☐ Retain the property and [explain]:	_	
Part 2: List Your	Unexpired Personal Property Leas	ses		
in the information be	elow. Do not list real estate leases	sted in Schedule G: Executory Contracts and Unexpire b. Unexpired leases are leases that are still in effect; the be if the trustee does not assume it. 11 U.S.C. § 365(p)(2	e lease period has not yet ended.	
Describe your unex	pired personal property leases		Will the lease be assumed?	
Lessor's name:	Stacy's Storage		□ No	
			Yes	
Description of leased Property:	Storage Unit			

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Deb	tor 1 _	Janis Riley Allen	Case number (if known)	19-50625	
Dow	2. 0:	inn Balann			
Part	3: S	ign Below			
		lty of perjury, I declare that I have indic at is subject to an unexpired lease.	cated my intention about any property of my estate that se	cures a debt and any personal	
Χ	/s/ Jai	nis Riley Allen	X		
	Janis	Riley Allen	Signature of Debtor 2		
	Signati	ure of Debtor 1			

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Fill in this information to identify your case:									
Debtor 1	Janis Riley Allen								
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA						
Case number	19-50625								
(if known)									

Check if this is an amended filing

### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	es complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your assets Value of what you own	
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	164,220.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	98,148.31
	1c. Copy line 63, Total of all property on Schedule A/B	\$	262,368.31
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	136,186.33
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	79,824.92
	Your total liabilities	\$	216,011.25
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,955.97
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,731.03
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	submit this form to

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Janis Riley Allen Case number (if known) 19-50625

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,736.62

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	69,647.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	69,647.00

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### **United States Bankruptcy Court** Northern District of Georgia

In re	Janis Riley Allen		Case No.	19-50625
		Debtor(s)	Chapter	7

# AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing Amendment to Schedules I and J with Summary of Schedules and Statement of Intentions, consisting of page(s), and that they are true and correct to the best of my knowledge, information, and belief.				
Date	October 18, 2019	Signature	/s/ Janis Riley Allen Janis Riley Allen Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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#### **United States Bankruptcy Court** Northern District of Georgia

In re	Janis Riley Allen		Case No.	19-50625
		Debtor(s)	Chapter	7

#### AMENDED AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith: **Amendment to Schedules I and J with Summary of Schedules and Statement of Intentions** 

#### NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a), I certify that notice of the filing of the amendment(s) listed above has been given this date to any and all entities affected by the amendment as follows:

Date: October 18, 2019 /s/ Karmel Sunzette Davis

Karmel Sunzette Davis 007707

Attorney for Debtor(s)

Karmel S. Davis & Associates

P.O. Box 5736

Douglasville, GA 30154

(678) 715-0967 Fax:(678) 715-0987

courthearings2@gmail.com

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#### **United States Bankruptcy Court** Northern District of Georgia

In re	Janis Riley Allen		Case No.	19-50625	
		Debtor(s)	Chapter	13	

#### CERTIFICATE OF SERVICE

I hereby certify that on <u>October 18, 2019</u> a copy of <u>Amendment to Schedules I and J with Summary of Schedules and Statement of Intentions</u> was served electronically or by regular United States mail to all interested parties, the Trustee and all creditors listed below.

### S. Gregory Hays

Hays Financial Consulting, LLC ghays@haysconsulting.net

/s/ Karmel Sunzette Davis

Karmel Sunzette Davis 007707 Karmel S. Davis & Associates P.O. Box 5736 Douglasville, GA 30154 (678) 715-0967Fax:(678) 715-0987 courthearings2@gmail.com